

## PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket No. (Optional)

IGI-111CNCPA

In re Application of Christine E. Seidman *et al.*Application Number  
08/469172Filed  
June 6, 1995For: A METHOD FOR DETECTING DISEASE-ASSOCIATED  
MUTATIONS

Art Unit 1634 Examiner C. J. Myers

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- |  |    |        |
|--|----|--------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))               | \$ |        |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))              | \$ |        |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$ | 930.00 |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))             | \$ |        |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))             | \$ |        |

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$

☐ A check in the amount of the fee is enclosed. 08/05/2003 DTESSEM1 00000017 120080 08469172

☐ Payment by credit card. Form PTO-2038 is attached. 01 FC:1253 930.00 DA

☒ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 12-0080

I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☐ attorney or agent of record.

☒ attorney or agent under 37 CFR 1.34(a).

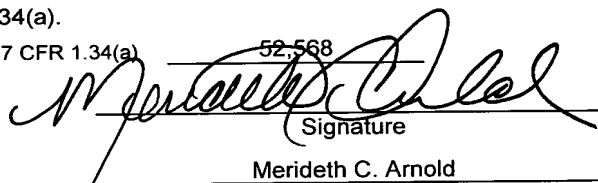
Registration number if acting under 37 CFR 1.34(a) 52,568

August 1, 2003

Date

(617) 227-7400

Telephone Number

  
Signature  
Merideth C. Arnold  
Typed or Printed Name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below

☐ Total of 1 forms are submitted.

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV355387432US, in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460, on the date shown below.

Dated: August 1, 2003

Signature:  (Merideth C. Arnold)